

**INTERNSHIP PROPOSAL FORM**

**INSTRUCTIONS:** Please attach a Duty Statement for the position(s). Be as concise and specific as possible. Students will apply for internships based on the information provided. If you have questions, please refer to the *Student Internship Program* located on eBOE or contact the Internship Coordinator, *Lou.Bender@boe.ca.gov*.

**Reminder: Program Staff will need to work with a college student's school schedule.**

**OFFICES INTERESTED IN HIRING AN INTERN SHOULD COMPLETE THIS FORM**

DEPARTMENT	DIVISION	DATE
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**SITE INTERN SUPERVISOR/MANAGER INFORMATION**

NAME		TITLE	
TELEPHONE NUMBER	FAX NUMBER	EMAIL ADDRESS	
BOE MAILING ADDRESS		BOE OFFICE LOCATION	

**INTERNSHIP INFORMATION**

JOB TITLE	NUMBER OF INTERN POSITIONS AVAILABLE FOR THIS JOB TITLE
INTERN HOURS PER WEEK	REQUESTED START DATE

**APPROVAL SIGNATURE**

SITE INTERN SUPERVISOR/MANAGER ( <i>print name</i> )	SITE INTERN SUPERVISOR/MANAGER 	DATE
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**POSITION DESCRIPTION**

The information from the Duty Statement attached will be used to create a position description that will be posted on the *Student Internship Program's* website and distributed to educational institutions.

**ATTACH DUTY STATEMENT**